Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF ARIZONA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Joyce	
	your government-issued picture identification (for	First name	First name
	example, your driver's license or passport).	Elaine	
	,	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Hedgecoke Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Elaine Hedgecoke	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9060	

Case	number	(if known)
------	--------	------------

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	EINs	EINs			
Where you live	1865 Krista Way	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code Maricopa	Number, Street, City, State & ZIP Code			
	County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs ### I have not used any business name or EINs. ### Business name(s) ### I have not used any business name or EINs. ### Business name(s) ### EINs ### I have not used any business name or EINs. ### Business name(s) ### EINs ### I have you live ### I have not used any business name or EINs. ### Business name(s) ### EINs ### I have you live ### I have not used any business name or EINs. ### Business name(s) ### EINs ### I have not used any business name or EINs. ### I have not used any business name or EINs. ### I have not used any business name or EINs. #### I have not used any business name or EINs. ### I have not used any business name or EINs. #### I have not used any business name or EINs. #### I have not used any business name or EINs. #### I have not used any business name or EINs. ##### I have not used any business name or EINs. ###################################			

Case number (if known)

7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by 1</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy	,	
	choosing to file under	•	napter 7	90 10 11.0 10 0. 1	rage i and encontrib appropriate	, 25		
			napter 11					
			napter 12					
			napter 13					
			•					
8.	How you will pay the fee		about how yo	ay the entire fee when I file my petition. Please check with the clerk's office in your local court for now you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check fyour attorney is submitting your payment on your behalf, your attorney may pay with a credit card or ripted address.				
					allments. If you choose this optio	n, sign and attach the Application for Individuals to Pa	ıy	
			ŭ		(Official Form 103A).			
						only if you are filing for Chapter 7. By law, a judge may ir income is less than 150% of the official poverty line		
						installments). If you choose this option, you must fill o ial Form 103B) and file it with your petition.	out	
			ше Аррисаці	ni to nave trie Gi	hapter / Filling Fee Walved (Offici	iai Form 103B) and me it with your petition.		
9.	Have you filed for bankruptcy within the		■ No.					
	last 8 years?	☐ Ye			NA/II. a. a.	Occasional an		
			District		When	Case number		
			District District		When When	Case number Case number		
			District		vvrien	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No	Go to l	ine 12.				
	residence?	■ Ye	l laa	ur landlord obtai	ned an eviction judgment against	you?		
		— 163	s.	No. Go to line 1		•		

public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 2:20-bk-01138-PS Doc 1 Filed 02/03/20 Entered 02/03/20 15:00:29 Des Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy Main Document Page 5 of 63

Joyce Elaine Hedgecoke Signature of Debtor 1

Email Address of Debtor 1

Executed on February 3, 2020

MM / DD / YYYY

Signature of Debtor 2

Executed on

Email Address of Debtor 2

MM / DD / YYYY

Case n	umber	(if known)
--------	-------	------------

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Sandra C. Oswalt/John D. Yohe	Date	February 3, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Sandra C. Oswalt/John D. Yohe		
Printed name		
Oswalt Law Group, PC		
Firm name		
300 W. Clarendon Avenue		
Suite 290		
Phoenix, AZ 85013		
Number, Street, City, State & ZIP Code		
Contact phone 602-225-2222	Email address	jyohe@oswaltlawgroup.com
027283/021636 AZ		
Bar number & State		

Certificate Number: 15725-AZ-CC-033827582



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 13, 2019</u>, at <u>12:51</u> o'clock <u>PM EST</u>, <u>Joyce Hedgecoke</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>District of Arizona</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 13, 2019

By: /s/Ambar Vasquez

Name: Ambar Vasquez

Title: Issuer

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

						2/03/20 2:59PM
Fill	in this informa	ation to identify your	case:			
Deb	otor 1	Joyce Elaine Hed	gecoke			
Dak	otor O	First Name	Middle Name	Last Name		
1 -	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bank	kruptcy Court for the:	DISTRICT OF ARIZONA			
Cas	se number					
	own)				_	k if this is an
					amer	nded filing
<u>Of</u>	ficial For	<u>m 106Sum</u>				
Su	mmary of	Your Assets a	and Liabilities an	d Certain Statistical Information		12/15
info you	rmation. Fill ou original form	it all of your schedule	es first; then complete the	are filing together, both are equally responsible fe information on this form. If you are filing amenous the box at the top of this page.		
						assets
					value	of what you own
1.	Schedule A/E 1a. Copy line	3: Property (Official Fosts, Total real estate, fosts, F	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	17,532.90
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	17,532.90
Par	t 2: Summa	rize Your Liabilities				
						iabilities
					Amour	nt you owe
2.			aims Secured by Property on A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	19,323.00
3.			Unsecured Claims (Official		¢	8,263.43
	3a. Copy the	total claims from Part	1 (priority unsecured claims	s) from line 6e of Schedule E/F	\$	0,203.43
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cla	aims) from line 6j of Schedule E/F	\$	113,875.07
				Your total liabilities	\$	141,461.50
						,
Par	t 3: Summa	rize Your Income and	Expenses			
4.	Schedule I: Y	our Income (Official Fo	orm 106I)			
				I	\$	4,086.68
5.		our Expenses (Official onthly expenses from li			\$	4,280.71
Par	t 4: Answer	These Questions for	Administrative and Statis	stical Records		
6.	Are you filing	n for hankruntey under	er Chapters 7, 11, or 13?			
0.			• • •	eck this box and submit this form to the court with yo	our other so	hedules.
	Yes					
7.	What kind of	debt do you have?				
				ebts are those "incurred by an individual primarily for grant of the statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

page 1 of 2

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,011.49

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,263.43
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	40,993.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	49,256.43

Best Case Bankruptcy

					2/03/20 2:59PN
Fill in this infor	mation to identify your	case and this filing:			
Debtor 1	Joyce Elaine Hed	dgecoke Middle Name	Last Name		
Debtor 2	Filst Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA			
Case number					7 - 011-70-1-1
Case number				L	Check if this is an amended filing
					· ·
Official Ec	orm 106A/B				
		ortv			
In each category, think it fits best.	Be as complete and accura re space is needed, attach	pe items. List an asset only onc ate as possible. If two married	e. If an asset fits in more than o people are filing together, both a On the top of any additional pag	are equally responsible for supp	olying correct
Part 1: Describe	e Each Residence, Buildin	g, Land, or Other Real Estate Y	ou Own or Have an Interest In		
1. Do you own or	have any legal or equitabl	e interest in any residence, bui	ilding, land, or similar property?		
■ No. Go to Pa	art 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	e Your Vehicles				
3. Cars, vans, to □ No ■ Yes	rucks, tractors, sport u	tility vehicles, motorcycles			
3.1 Make:	Nissan	Who has an interes	t in the property? Check one	Do not deduct secured clair	
Model:	Altima 2.5 S Sedan		,	the amount of any secured Creditors Who Have Claims	
Year:	2018	Debtor 2 only		Current value of the	Current value of the
	-	,000 Debtor 1 and Deb	•	entire property?	portion you own?
Other infor	is in very good	At least one of the	e debtors and another		
conditio		Check if this is o	community property	\$15,510.00	\$15,510.00
www.kb					
	der: Exeter Finance I l at debtor's residenc	=			
			vehicles, other vehicles, an els, snowmobiles, motorcycle a		
5 Add the doll pages you h	ave attached for Part 2	. Write that number here	ries from Part 2, including ar		\$15,510.00
	Your Personal and Hous	ehold Items able interest in any of the f	following items?	· · ·	urrent value of the
Do you own or	nave any legal or equit	able iliterest ill ally of the f	onowing items :		ortion you own?
Official Form 106	SA/B	Schedule	e A/B: Property		page 1

Best Case Bankruptcy

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

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Schedule A/B: Property

page 2

Best Case Bankruptcy

De	ebtor 1	Joyce Elaine	Hedgecoke	Cas	e number (if known)	
	☐ Yes.	Describe				
12	Non-fai	rm animals				
10.	_Examp	oles: Dogs, cats, l	birds, horses			
	□ No	Describe				
	■ Yes.	Describe				
			4 Cats.			
			1 Dog. Located at debtor's	residence.		Unknown
14.	Any otl ■ No	her personal an	d household items you	did not already list, including any health aids	you did not list	
	☐ Yes.	Give specific info	ormation			
15				m Part 3, including any entries for pages you	have attached	\$867.00
Pa	rt 4: Des	scribe Your Finan	cial Assets			
Do	you ow	n or have any le	egal or equitable interes	t in any of the following?		Current value of the
						portion you own? Do not deduct secured claims or exemptions.
16.	Cash					
	Examp	oles: Money you h	nave in your wallet, in you	r home, in a safe deposit box, and on hand whe	n you file your petition	
	■ No					
17.		its of money bles: Checking, sa	avings, or other financial	accounts; certificates of deposit; shares in credit	unions, brokerage house	es, and other similar
		institutions.	If you have multiple acco	unts with the same institution, list each.		
	□ No ■ Yes			Institution name:		
	- 103			Wells Fargo Bank checking ac	count #1429.	
			17.1.	balance as of date of filing.		\$5.90
			17.2.	Wells Fargo Bank savings according balance as of date of filing.	ount #1050,	\$0.00
			17.2.	Salarios de or date or rining.		Ψ0.00
18	Ronds	mutual funds	or publicly traded stock	s		
	Examp			brokerage firms, money market accounts		
	■ No		Institution or ico	uor nama:		
	⊔ Yes		Institution or iss	uer name.		
19.	joint v	iblicly traded steenture	ock and interests in inc	orporated and unincorporated businesses, ir	ncluding an interest in a	in LLC, partnership, and
	■ No	Give specific info	ormation about them			
	□ 163.	Oive specific init	Name of entity:		of ownership:	
20.	Govern	ment and corpo	orate bonds and other n	egotiable and non-negotiable instruments		
				cashiers' checks, promissory notes, and money t transfer to someone by signing or delivering th		
	■ No	agouable illoudill	and those you carrie		·····	
	☐ Yes.	Give specific info	ormation about them			
			Issuer name:			

Official Form 106A/B

Schedule A/B: Property

D	ebtor 1	Joyce Elaine Hedgecoke	Case number (if known)	
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing plan	าร
	■ No □ Yes. I	ist each account separately. Type of account:	Institution name:	
22.	Your sh	y deposits and prepayments hare of all unused deposits you have made so les: Agreements with landlords, prepaid rent, p	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies	, or others
			Institution name or individual:	
			Residential security deposit with Allen O. VanderWey and Elizabth Cole.	\$1,150.00
23.	■ No	, , , , ,	ey to you, either for life or for a number of years)	
	☐ Yes			
24.		s in an education IRA, in an account in a qu C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition progra	ım.
	☐ Yes	Institution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future interests in property (of	ther than anything listed in line 1), and rights or powers exerci	sable for your benefit
	☐ Yes.	Give specific information about them		
26.	Examp ■ No	es: Internet domain names, websites, proceed Give specific information about them		
27.	License	es, franchises, and other general intangible	es erative association holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you		
	■ No □ Yes. 0	Give specific information about them, including	g whether you already filed the returns and the tax years	
29	■ No		upport, child support, maintenance, divorce settlement, property set	itlement
30.	Examp	mounts someone owes you les: Unpaid wages, disability insurance payme benefits; unpaid loans you made to some	ents, disability benefits, sick pay, vacation pay, workers' compensa one else	tion, Social Security
	■ No □ Yes.	Give specific information		
31.		es in insurance policies les: Health, disability, or life insurance; health	savings account (HSA); credit, homeowner's, or renter's insurance	
<u> </u>		Name the insurance company of each policy a		
Off	ficial Form	I TUDA/B	Schedule A/B: Property	page 4

Best Case Bankruptcy

Debtor 1	Joyce Elaine Hedgecoke	Case number (if known)	2/03/20 2.39FF
	Company name:	Beneficiary:	Surrender or refund value:
	Sun Life Assurance Company of Canada, group term life insurance policies #912852-002 & #912852-00 through employer. No cash value.	ı 1	\$0.00
If you some	nterest in property that is due you from someone who has die are the beneficiary of a living trust, expect proceeds from a life insone has died. Give specific information		eive property because
33. Claim <i>Exam</i> ■ No	as against third parties, whether or not you have filed a lawsui nples: Accidents, employment disputes, insurance claims, or rights Describe each claim		
■ No	contingent and unliquidated claims of every nature, including	g counterclaims of the debtor and rights to	set off claims
■ No	inancial assets you did not already list Give specific information		
	the dollar value of all of your entries from Part 4, including are art 4. Write that number here		\$1,155.90
Part 5: D	escribe Any Business-Related Property You Own or Have an Interest I	In. List any real estate in Part 1.	
■ No. G	own or have any legal or equitable interest in any business-related posts to Part 6. Go to line 38.	roperty?	
	escribe Any Farm- and Commercial Fishing-Related Property You Own you own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
■ No	ou own or have any legal or equitable interest in any farm- or one of the control	commercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Dic	d Not List Above	
	ou have other property of any kind you did not already list? nples: Season tickets, country club membership		
☐ Yes	. Give specific information		
54 A dd	the dollar value of all of your entries from Part 7 Write that n	umher here	00.00

Official Form 106A/B Schedule A/B: Property page 5

Debici 1 Joy	ce Liaille Heugecoke			
Part 8: List th	e Totals of Each Part of this Form			
55. Part 1: Tota	I real estate, line 2			\$0.00
56. Part 2: Tota	l vehicles, line 5	\$15,510.00		
57. Part 3: Tota	l personal and household items, line 15	\$867.00		
58. Part 4: Tota	I financial assets, line 36	\$1,155.90		
59. Part 5: Tota	l business-related property, line 45	\$0.00		
60. Part 6: Tota	I farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Tota	l other property not listed, line 54	+ \$0.00		
62. Total perso	nal property. Add lines 56 through 61	\$17,532.90	Copy personal property total	\$17,532.90
63. Total of all p	property on Schedule A/B. Add line 55 + line 62			\$17,532.90

Debtor 1	Joyce Elaine F	ledgecoke		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number				
(if known)				☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	Exempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	2018 Nissan Altima 2.5 S Sedan 4D	\$15,510.00		\$6,000.00	Ariz. Rev. Stat. § 33-1125(8)				
	20,000 miles Vehicle is in very good condition. Value obtained from www.kbb.com. Lienholder: Exeter Finance LLC. Located at debtor's residence. Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	2 Living room end tables \$20.00.	\$315.00		\$315.00	Ariz. Rev. Stat. § 33-1123				
	2 Beds \$200.00. 3 Bedside tables \$20.00. 1 Bedroom dresser \$10.00. 1 Bedroom lamp \$5.00. 8 Pictures/paintings \$20.00. 1 Vacuum cleaner \$20.00. 1 Desk \$5.00. 1 Desk chair \$5.00. Misc. hand tools \$10.00. Located at Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	3 Televisions \$200.00. 1 Alarm clock \$2.00.	\$252.00		\$252.00	Ariz. Rev. Stat. § 33-1123				
	1 Game station \$50.00. Located at debtor's residence. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

ebtor 1	Joyce Elaine Hedgecoke			Case number (if known)		
	description of the property and line on edule A/B that lists this property	Current value of the Amount of the exemption you claim Specific laws that allow exemportion you own				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	c. women's & children's clothing. ated at debtor's residence.	\$200.00		\$500.00	Ariz. Rev. Stat. § 33-1125(1)	
	from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
4 Ca 1 Da		Unknown		100%	Ariz. Rev. Stat. § 33-1125(11)	
Loc	og. cated at debtor's residence. e from <i>Schedule A/B</i> : 13.1			100% of fair market value, up to any applicable statutory limit		
	Is Fargo Bank checking account	\$5.90	•	\$300.00	Ariz. Rev. Stat. § 33-1126(A)(9	
	29, balance as of date of filing. from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit		
	idential security deposit with n O. VanderWey and Elizabth	\$1,150.00		\$2,000.00	Ariz. Rev. Stat. § 33-1126(C)	
Cole				100% of fair market value, up to any applicable statutory limit		
	Life Assurance Company of ada, group term life insurance	\$0.00		100%	Ariz. Rev. Stat. § 20-1132	
poli thro	cies #912852-002 & #912852-001 bugh employer. cash value. from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		

						2/03/20 2:59PM
Fill in this informa	ation to identify you	case:				
Debtor 1	Joyce Elaine He	dgecoke				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	DISTRICT OF ARIZONA				
Case number					_	if this is an led filing
Official Form	106D					
Schedule [D: Creditors	Who Have Claims	Secure	by Property	/	12/15
		two married people are filing togeth ut, number the entries, and attach it				
1. Do any creditors h	ave claims secured by	your property?				
☐ No. Check t	his box and submit th	is form to the court with your other	schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in a	all of the information b	elow.				
Part 1: List All	Secured Claims					
		ore than one secured claim, list the cre	editor separately	Column A	Column B	Column C
for each claim. If mo	re than one creditor has	a particular claim, list the other creditor al order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Exeter Fina	ance LLC	Describe the property that secures	the claim:	\$19,323.00	\$15,510.00	\$3,813.00
Creditor's Name		2018 Nissan Altima 2.5 S Se 20,000 miles Vehicle is in very good cond Value obtained from www.k Lienholder: Exeter Finance Located at debtor's residen	dition. bb.com. LLC. ce.			
P.O. Box 2	04480	As of the date you file, the claim is: apply.	Check all that			
Dallas, TX	75320	Contingent				
Number, Street, 0	City, State & Zip Code	Unliquidated				
Who owes the deb	t? Charle and	Disputed Nature of lien. Check all that apply.				
Debtor 1 only	t: Check one.	☐ An agreement you made (such as car loan)	mortgage or sec	cured		
☐ Debtor 2 only ☐ Debtor 1 and Deb	otor 2 only	Statutory lien (such as tax lien, me	chanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit	onamo o mon,			
Check if this claic community deb	im relates to a	Other (including a right to offset)	Auto Loan.			
Date debt was incur	red 4/2/2019	Last 4 digits of account num	ber 4183			
	age of your form, add t	olumn A on this page. Write that num he dollar value totals from all pages.		\$19,32 \$19,32		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

									2/03/20 2:59PM
Fill in th	is informat	tion to identify your o	case:						
Debtor 1	_	Joyce Elaine Hed					_		
		First Name	Middle	e Name	Last Nam	Э			
Debtor 2 (Spouse if,	_	First Name	Middle	e Name	Last Nam	9			
		ruptcy Court for the:		T OF ARIZONA					
(if known)	mber							_	if this is an ded filing
Officia	I Form	106E/F							
Sched	lule E/F	: Creditors W	ho Hav	e Unsecured	l Claim	S			12/15
Schedule Schedule left. Attacl	G: Executor D: Creditors h the Contin	ets or unexpired leases y Contracts and Unexpi Who Have Claims Sectuation Page to this page er (if known).	ired Leases ured by Prop	(Official Form 106G). perty. If more space is	Do not inclus needed, co	ide any cre py the Part	ditors with partially s you need, fill it out, i	ecured claims that a number the entries i	are listed in n the boxes on the
Part 1:	List All o	f Your PRIORITY Un	secured C	laims					
1. Do ar	ny creditors	have priority unsecured	d claims aga	ainst you?					
	o. Go to Part	2.							
■ Ye	es.								
identi possi	fy what type of the cl	iority unsecured claims of claim it is. If a claim ha aims in alphabetical orde n one creditor holds a pa	s both priorit r according t	y and nonpriority amou to the creditor's name. I	nts, list that o	laim here a	nd show both priority a	nd nonpriority amour	its. As much as
(For a	an explanatio	n of each type of claim, s	ee the instru	ctions for this form in th	ne instruction	booklet.)	Total claim	Priority amount	Nonpriority amount
2.1	Arizona D	epartment of Reve	nue	Last 4 digits of acco	unt number	9060	\$138.05	\$138.05	
F	Priority Credit Bankrupto	<u> </u>		When was the debt i	ncurred?	12/31/2	018	. <u> </u>	<u> </u>
	Phoenix,								
		et City State Zip Code		As of the date you fil	le, the claim	is: Check a	all that apply		
_		ne debt? Check one.		☐ Contingent					
= [Debtor 1 only			☐ Unliquidated					
	Debtor 2 only			☐ Disputed					
	Debtor 1 and	Debtor 2 only		Type of PRIORITY ur	nsecured cla	im:			
	At least one o	of the debtors and anothe	r	☐ Domestic support	obligations				
_		claim is for a commun		■ Taxes and certain	other debts v	ou owe the	government		
		ject to offset?	•	☐ Claims for death o			•		
■ 1	No			Other. Specify					
					tate Inco	ne Tax.			-

ebtor 1 Joyce Elaine Hedgecoke		Case numb	oer (if known)		
Internal Revenue Service	Last 4 digits of account number	9060	\$4,124.44	\$4,124.44	\$0.00
Priority Creditor's Name Central Insolvency Operations P.O. Box 7346	When was the debt incurred?	12/31/2015			
Philadelphia, PA 19101					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that	at apply		
Who incurred the debt? Check one.	Contingent				
■ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed Type of PRIORITY unsecured cla				
Debtor 1 and Debtor 2 only	Domestic support obligations	allii.			
☐ At least one of the debtors and another	■ Taxes and certain other debts	vous avec the gove			
☐ Check if this claim is for a community debt Is the claim subject to offset?	Claims for death or personal in	_			
■ No	Other. Specify	-			
Yes	Federal In	come rax.			
Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	9060	\$3,655.94	\$3,655.94	\$0.00
Central Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101	When was the debt incurred?	12/31/2017			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all the	at apply		
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed Type of PRIORITY unsecured cla	nim.			
☐ Debtor 1 and Debtor 2 only	Domestic support obligations	aiiii.			
☐ At least one of the debtors and another	_	46			
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts y□ Claims for death or personal in	-			
■ No	Other. Specify	,a.,			
Yes	Federal Inc	come Tax.			
Internal Revenue Service	Last 4 digits of account number	9060	\$345.00	\$345.00	\$0.00
Priority Creditor's Name Central Insolvency Operations P.O. Box 7346	When was the debt incurred?	12/31/2018			
Philadelphia, PA 19101 Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	at apply		
Who incurred the debt? Check one.	☐ Contingent		,		
■ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
\square At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts	-			
-		بيد بيميد مانطييد بسين	ere intoxicated		
Is the claim subject to offset?	Claims for death or personal in	jury write you we	no internoutou		
Is the claim subject to offset? ■ No	Other. Specify				
Is the claim subject to offset?	•				
Is the claim subject to offset? ■ No □ Yes	Other. Specify Federal Inc				
Is the claim subject to offset? No Yes Art 2: List All of Your NONPRIORITY Unsections	Other. Specify Federal Inc				
Is the claim subject to offset? No Yes Art 2: List All of Your NONPRIORITY Unsecupon any creditors have nonpriority unsecured claim	Other. Specify Federal Income ured Claims ns against you?	come Tax.			
Is the claim subject to offset? No Yes Art 2: List All of Your NONPRIORITY Unsection	Other. Specify Federal Income ured Claims ns against you?	come Tax.			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 13

Case number (if I	(nown	
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			Total claim
Ad Astra Recovery Services, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	6438	\$1,365.00
7330 W. 33rd Street N., Ste. 118 Wichita. KS 67205	When was the debt incurred?	5/14/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collecting f	for Speedy Cash.	
Allied Interstate, LLC	Last 4 digits of account number	0859	\$79.00
Nonpriority Creditor's Name P.O. Box 361774 Columbus, OH 43236	When was the debt incurred?	8/30/2019	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collecting 1	for Dish Network.	
Ally Financial	Last 4 digits of account number	6738	\$8,033.00
Nonpriority Creditor's Name P.O. Box 380901	When was the debt incurred?	3/20/2014	
Minneapolis, MN 55438-0901 Number Street City State Zip Code	As of the date you file, the claim i		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane and other similar data	
■ No	Debts to pension or profit-sharin	• •	
Yes	Other. Specify Deficiency	Balance due to Repossession.	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor	1 Joyce Elaine Hedgecoke	Case number (if known)				
4.4	Arizona Water Company	Last 4 digits of account number 1890	\$90.44			
	Nonpriority Creditor's Name P.O. Box 400 Apache Junction, AZ 85117	When was the debt incurred? 11/12/2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Utility Company.				
4.5	Bridgecrest Acceptance Corp.	Last 4 digits of account number	\$14,068.69			
	Nonpriority Creditor's Name P.O. Box 53087 Phoenix, AZ 85072	When was the debt incurred? 4/22/2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Deficiency Balance due to Repossession.				
4.6	Capital One Bank USA, N.A.	Last 4 digits of account number	\$1,361.00			
	Nonpriority Creditor's Name Corporate Headquarters 1680 Capital One Drive	When was the debt incurred? 3/6/2008				
	McLean, VA 22102 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
		Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Charged-off Credit Card.				

Debtor	1 Joyce Elaine Hedgecoke			
4.7	Capital One Bank USA, N.A. Nonpriority Creditor's Name	Last 4 digits of account number		\$928.00
	Corporate Headquarters 1680 Capital One Drive McLean, VA 22102	When was the debt incurred?	1/27/2011	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charged-of	f Credit Card.	
4.8	Coast to Coast Nonpriority Creditor's Name	Last 4 digits of account number	7468	\$81.39
	101 Hodencamp Road, Ste 120 Thousand Oaks, CA 91360	When was the debt incurred?	July 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Personal de Collecting	ebt for Republic Services	
4.9	Collection Bureau of America Nonpriority Creditor's Name	Last 4 digits of account number	3581	\$175.00
	25954 Eden Landing Road Hayward, CA 94545	When was the debt incurred?	1/5/2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collecting	for DS Services of America.	

Case number (if known)	
Last 4 digits of account number	\$2.346.00
When was the debt incurred? 8/10/2011	ΨΞ,σ 10100
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
·	
·	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Charged-off Revolving Charge Account.	
Last 4 digits of account number 9074	\$83.55
When was the debt incurred? 11/13/2019	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Collecting for LabCorp.	
Last 4 digits of account number	\$2,118.0
When was the debt incurred? 11/27/2012	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ Other. Specify Charged-off Credit Card.	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Charged-off Revolving Charge Account. Last 4 digits of account number When was the debt incurred? 11/13/2019 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Collecting for LabCorp. Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Collecting for LabCorp. Last 4 digits of account number When was the debt incurred? 11/27/2012 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Collecting for LabCorp.

Debto	Joyce Elaine Hedgecoke		Case number (if known)	
4.1	Credit One Bank, N.A.	land delimites of assessment assessment		\$1,202.00
3	Nonpriority Creditor's Name P.O. Box 98875	Last 4 digits of account number When was the debt incurred?	6/18/2014	\$1,202.00
	Las Vegas, NV 89193			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	П 0		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Charged-of	ff Credit Card.	
4.1	Enhanced Recovery Company, LLC	Last 4 digits of account number	2460	\$263.00
	Nonpriority Creditor's Name 8014 Bayberry Road Jacksonville, FL 32256-7412	When was the debt incurred?	10/15/2019	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Collecting	•	
4.1	Federal Loan Servicing		1989	\$40,993.00
5	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ 4 0,993.00
	P.O. Box 60610 Harrisburg, PA 17106	When was the debt incurred?	5/13/2009	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	d Glaini.	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	manon agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Education	Loan	

Debto	tor 1 Joyce Elaine Hedgecoke Case number (if known)			
4.1 6	Freedom Financial Asset	Last 4 digits of account number	4349	\$18,752.00
	Nonpriority Creditor's Name 1875 S. Grant St. Ste 400 San Mateo, CA 94402	When was the debt incurred?	3/8/2017	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Note Loan.		
4.1	JPMCB Card	Last 4 digits of account number		\$4,044.00
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850	When was the debt incurred?	2/22/2011	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.		,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the second state of th	
	■ No	Debts to pension or profit-sharing	• •	
	Yes	Other. Specify Charged-of	f Credit Card.	
4.1 8	Kohls Payment Center	Last 4 digits of account number		\$3,553.00
	Nonpriority Creditor's Name P.O. Box 30510 Los Angeles, CA 90030	When was the debt incurred?	12/10/2010	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	-	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No			
	☐ Yes	Other. Specify Charged-of	f Revolving Charge Account.	

Joyce Elaine Hedgecoke		Case number (if known)	
Portfolio Recovery Associates, LLC	Last 4 digits of account number	0764	\$441.0
Nonpriority Creditor's Name POB 41067 Norfolk, VA 23541	When was the debt incurred?	6/29/2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collecting	for CitiBank, N.A.	
Radius Global Solutions, LLC	Last 4 digits of account number	5495	\$95.0
Nonpriority Creditor's Name			
PO Box 390900 Minneapolis, MN 55439	When was the debt incurred?	5/5/2019	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collecting	for Medical Payment Data.	
Sequium Asset Solutions, LLC	Last 4 digits of account number	2094	\$471.0
Nonpriority Creditor's Name 1130 Northcase Pkwy., Ste. 150 Marietta, GA 30067	When was the debt incurred?	9/13/2019	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing		
☐ Yes	■ Other. Specify Collecting	for Directv.	

Debtor 1 Joyce Elaine Hedgecoke		Case number (if known)			
4.2				****	
2	Sunrise Credit Services, Inc.	Last 4 digits of account number	8987	\$263.00	
	Nonpriority Creditor's Name 260 Airport Plaza, P.O. Box 9168 Farmingdale, NY 11735	When was the debt incurred?	4/12/2019		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:		l claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
	□ Yes	Other. Specify Collecting	• •		
	Li Yes	Other. Specify	or AT&T Wobility.		
42					
4.2 3	Synchrony Bank	Last 4 digits of account number		\$5,009.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Department P.O. Box 965060	When was the debt incurred?	8/21/2011		
	Orlando, FL 32896-5060				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	· ·	f Revolving Charge Account.		
		Other. Specify			
4.2	Synchrony Bank	Last 4 digits of account number		\$4.143.00	
7	Nonpriority Creditor's Name			· ,	
	Attn: Bankruptcy Department P.O. Box 965060	When was the debt incurred?	1/18/2015		
	Orlando, FL 32896-5060 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	, to or the date you me, the claim	o. Oncor an that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharin			
	Yes	Other. Specify Charged-of	f Revolving Charge Account.		

ebtor 1 Joyce Elaine Hedgecoke	Case number (if known)	Case number (if known)			
TD Bank USA/Target Credit	Last 4 digits of account number	\$909.00			
Nonpriority Creditor's Name P.O. 673	When was the debt incurred? 12/14/2013	,			
Minneapolis, MN 55440 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Credit Card.				
Trident Asset Management	Last 4 digits of account number 4166	\$900.00			
Nonpriority Creditor's Name 53 Perimeter Ctr. E. Ste. 450 Atlanta, GA 30346	When was the debt incurred? 2/28/2019				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community debt	☐ Student loans				
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Collecting for Celtic Bank.				
Trident Asset Management	Last 4 digits of account number 4166	\$899.00			
Nonpriority Creditor's Name	 -	·			
53 Perimeter Ctr. E. Ste. 450 Atlanta, GA 30346	When was the debt incurred? 3/9/2019				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	O Continuent				
☐ Debtor 2 only	☐ Contingent ☐ Unliquidated				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Collecting for CB Indigo/GF.				
	· · ·				

Debto	¹ Joyce Elaine Hedgecoke		Case number (if known)	
4.2	Verizon Wireless	Last 4 digits of account number	r 8912	\$1,209.00
0	Nonpriority Creditor's Name Attention: Bankruptcy Dept. 500 Technology Drive, Ste. 550 Weldon Spring, MO 63304	When was the debt incurred?	3/4/2019	
	Number Street City State Zip Code	As of the date you file, the clain	n is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecur ☐ Student loans	ed claim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you	i did not
	■ No	☐ Debts to pension or profit-shar	ring plans, and other similar debts	
	☐ Yes	■ Other Specify Wireless	ohone services.	
		— Other. Specify		
Part 3	List Others to Be Notified About a D	ebt That You Already Listed		
is try have	this page only if you have others to be notified ving to collect from you for a debt you owe to more than one creditor for any of the debts the ied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor nat you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection	on agency here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo		
	T Mobility Lenox Park Blvd., NE, Rm.		Part 1: Creditors with Priority Unser	
A325		'	Part 2: Creditors with Nonpriority U	nsecured Claims
Atlan	ita, GA 30319	Look 4 digits of account number		
		Last 4 digits of account number		
	and Address Γ Mobility	On which entry in Part 1 or Part 2 did you Line 4.22 of (<i>Check one</i>):		avera di Olafiara
	ox 6463		□ Part 1: Creditors with Priority Unser■ Part 2: Creditors with Nonpriority U	
Caro	l Stream, IL 60197		- Part 2: Creditors with Nonphority 0	risecured Ciairis
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did yo		
	ndigo/GF ox 4499		Part 1: Creditors with Priority Unser	
_	erton, OR 97076		Part 2: Creditors with Nonpriority U	nsecured Claims
	,	Last 4 digits of account number	4291	
Celtic	and Address C Bank		Part 1: Creditors with Priority Unser	
	Continental Drive, Ste. 110 ark, DE 19713		Part 2: Creditors with Nonpriority U	nsecured Claims
INCW	ir, DL 13713	Last 4 digits of account number		
	and Address ank, N.A.	On which entry in Part 1 or Part 2 did you Line 4.19 of (<i>Check one</i>):	ou list the original creditor? ☐ Part 1: Creditors with Priority Unser	cured Claims
	East 60th Street North		Part 2: Creditors with Nonpriority U	nsecured Claims
Sioux	x Falls, SD 57117	Last 4 digits of account number		
		<u> </u>		
Name a	and Address	On which entry in Part 1 or Part 2 did you Line 4.21 of (Check one):	_	
	ox 5007		□ Part 1: Creditors with Priority Unser■ Part 2: Creditors with Nonpriority U	
_	Stream, IL 60197		Fait 2: Creditors with Nonpriority U	risecured Ciaims
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did yo	•	
	Network Box 7203	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unser	
· .U.	DUA 1 200		Part 2: Craditara with Nappriority II	nagaurad Claima

Official Form 106 E/F

Pasadena, CA 91109-7303

Schedule E/F: Creditors Who Have Unsecured Claims

Last 4 digits of account number

Page 12 of 13

Desc

■ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Joyce Elaine Hedgecoke		Case number (if known)			
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?			
DS Services of America	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
2300 Windy Ridge Parkway Ste. 500N		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Atlanta, GA 30339	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?			
LabCorp	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 2240 Burlington, NC 27216		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Burnington, NO 27210	Last 4 digits of account number	5340			
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?			
Speedy Cash	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Attn: Bankruptcy Dept. P.O. Box 780408 Wichita, KS 67278		■ Part 2: Creditors with Nonpriority Unsecured Claims			
,	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 8,263.43
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 8,263.43
				Total Claim
Total	6f.	Student loans	6f.	\$ 40,993.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 72,882.07
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 113,875.07

Fill in this infor	mation to identify your			
Debtor 1	Joyce Elaine Hed	lgecoke		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number				Charle if this is an
(ii idiowii)				Check if this is an amended filing
				amended illing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Allen O. VanderWey and Elizabth Cole 7726 S. Apricot Dr. Tempe, AZ 85284	Residential lease agreement, expires 7/1/2020, debtor to assume.
2.2	Cox Communications 1400 Lake Hearn Drive Atlanta, GA 30319	Internet service provider, month to month, debtor to assume.
2.3	Rent-A-Center Attn: Customer Relations 5501 Headquarters Drive Plano, TX 75024	Lease agreement for household goods (1 Dining Table Set & 1 Living Room Sectional), month to month, debtor to assume.
2.4	Sprint Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207	Wireless cell phone service provider, expires 3/2020, debtor to assume.

					i	2/03/20 2:59PI
Fill in this	s information to identify your	case:				
Debtor 1	Joyce Elaine Hed					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, fil	ling) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	DISTRICT OF ARIZON	Α			
Case num	nber					
(if known)					☐ Check if amended	
Sched	al Form 106H dule H: Your Code s are people or entities who a		ots vou may have. Be as	s complete and accur	rate as possible. If to	12/15
people are fill it out, a	e filing together, both are equal and number the entries in the e and case number (if known)	ally responsible for sup boxes on the left. Attac	plying correct informati h the Additional Page to	on. If more space is	needed, copy the Ac	dditional Page,
1. Do	you have any codebtors? (If y	you are filing a joint case,	do not list either spouse	as a codebtor.		
□ No	1					
■ Ye	S					
	thin the last 8 years, have you na, California, Idaho, Louisiana,					es include
■ No	. Go to line 3.					
	s. Did your spouse, former spou	ıse, or legal equivalent liv	e with you at the time?			
in line Form	olumn 1, list all of your codebt e 2 again as a codebtor only it n 106D), Schedule E/F (Official column 2.	f that person is a guarar	ntor or cosigner. Make s	sure you have listed t	he creditor on Sche	dule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	editor to whom you les that apply:	owe the debt
3.1	Jonathan Hedgecoke 1865 Krista Way Tempe, AZ 85284 Debtor's son.			■ Schedule D, I □ Schedule E/F □ Schedule G _ Exeter Finance	, line	

Schedule H: Your Codebtors

Fill	in this information to identify your ca	ase:								
Del	Joyce Elaine	e Hedgecoke			_					
1 -	otor 2 puse, if filing)									
Uni	ted States Bankruptcy Court for the	DISTRICT OF ARIZON	NA		_					
Case number (If known)						Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:				
0	fficial Form 106I						O/ YYYY	Tollowing	date.	
	chedule I: Your Inc	ome				IVIIVI / DI	2/ 1111		12/1	
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your sp th you, do not include	ouse i	s livir natio	ng with you, i n about your	nclude info spouse. If r	rmation a	about your ce is needed,	
1.	Fill in your employment information.		Debtor 1			Debt	or 2 or non-	-filing spo	ouse	
	If you have more than one job,		■ Employed				☐ Employed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			□ N	☐ Not employed			
		Occupation	Director of Finance	cial Ai	d.					
	Include part-time, seasonal, or self-employed work.	Employer's name	Arizona College.	Arizona College.						
	Occupation may include student or homemaker, if it applies.	Employer's address	163 N. Dobson Ro Mesa, AZ 85201	d.						
		How long employed th	nere? <u>5/20/2019</u>	- Pre	sent	<u>. </u>				
Pai	t 2: Give Details About Mor	thly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	ou have nothing to rep	ort for a	any lir	ne, write \$0 in	the space. I	nclude yo	ur non-filing	
,	u or your non-filing spouse have mo e space, attach a separate sheet to	. , ,	mbine the information f	or all e	mploy	yers for that pe	rson on the	lines belo	ow. If you need	
						For Debtor 1		ebtor 2 o		
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$_	5,000.0	0 \$		N/A	
3.	Estimate and list monthly overti	ime pay.		3.	+\$_	0.0	0 +\$ _		N/A	

Calculate gross Income. Add line 2 + line 3.

5,000.00

N/A

				For	For Debtor 1		For Debtor 2 or		
	Con	y line 4 here	4.	\$	E 000		non-	filing spouse	1
	Copy	y lifte 4 fiere	4.	Φ_	5,000	.00	Φ	N/A	-
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	791	.77	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$.00	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$.00	\$	N/A	=
	5d.	Required repayments of retirement fund loans	5d.	\$	C	.00	\$	N/A	=
	5e.	Insurance	5e.	\$	100	.79	\$	N/A	-
	5f.	Domestic support obligations	5f.	\$	C	.00	\$	N/A	_
	5g.	Union dues	5g.	\$	C	.00	\$	N/A	_
	5h.	Other deductions. Specify: AD&D	5h.	+ \$_	C	.20	+ \$	N/A	_
		Critical Illness		\$_	17	.68	\$	N/A	_
		Life	_	\$_	2	2.88	\$	N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	913	3.32	\$	N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,086	6.68	\$	N/A	_
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$.00	\$	N/A	
	8b.	Interest and dividends	8b.			.00	\$ 	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		_			Ψ	IVA	-
		settlement, and property settlement.	8c.	\$	C	.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0	.00	\$	N/A	-
	8e.	Social Security	8e.	\$	C	.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	C	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	C	.00	\$	N/A	-
	8h.	Other monthly income. Specify:	8h.	+ \$_	C	.00	+ \$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	C	.00	\$	N/A	A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.		4,086.68	+ \$		N/A = \$	4,086.68
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		·	1,000.00	` -			1,000100
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	depe		•		•	chedule J.	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resent that amount on the Summary of Schedules and Statistical Summary of Certales						12. \$	4,086.68
13.	Do y	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?					Combii monthl	ned y income

Fill	in this informat	tion to identify yo	our case:								
Deb	tor 1	Joyce Elaine	Hedgec	oke			Chec	ck if this is:			
L .							An amended filing				
	tor 2 ouse, if filing)						A supplement showing postpetition chapter 13 expenses as of the following date:				
(Opc	Juse, ii iiiiig)							10 expenses as or t	ne following date.		
Unit	ed States Bankr	uptcy Court for the	DISTRI	CT OF ARIZONA			MM / DD / YYYY				
1	e number										
(If Kr	nown)										
Of	fficial Fo	rm 106J									
Sc	chedule	J: Your I	Exper	ses						12/15	
Be a	as complete a	and accurate as	possible.	If two married pe ch another sheet					r supplying correct our name and case		
Pari	t 1: Descr Is this a join	ibe Your House	hold								
1.	-										
	■ No. Go to			-4- hh-1-12							
		s Debtor 2 live i	n a separ	ate nousehold?							
		-									
	∐ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>E.</i>	xpenses t	or Separate House	hold of Deb	tor 2.			
2.	Do you have	e dependents?	□ No								
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this informate each dependent		Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?		
	Do not state	the							□ No		
	dependents i	names.				Son		22	Yes		
									□ No		
									☐ Yes		
									□ No		
									☐ Yes		
									□ No		
3.	Do your eyn	enses include							☐ Yes		
J.	expenses of	f people other the d your depender	han $_{f \Box}$	No Yes							
Par		ate Your Ongoiı									
exp	imate your ex enses as of a dicable date.	penses as of you	our bankri oankruptc	uptcy filing date u y is filed. If this is	inless yo a supple	u are using this for emental <i>Schedule</i>	orm as a su J, check th	ipplement in a Cha ne box at the top of	pter 13 case to repo the form and fill in	rt the	
Incl	ude expense	s paid for with r	non-cash	government assis	stance if v	vou know					
the	value of such	n assistance and		luded it on Sche				V			
(Off	ficial Form 10	6l.)						Your expe	enses		
4.		r home owners		•	dence. Inc	clude first mortgage	4. \$.	1,150.00		
	If not includ	ed in line 4:									
							, ,		-		
		state taxes	OF #0=4:	o incurence			4a. \$		0.00		
	•	rty, homeowner's maintenance re	-	s insurance ipkeep expenses			4b. \$ 4c. \$	·	0.00 0.00		
		owner's associat					4d. \$		0.00		
5.				our residence, suc	ch as hom	e equity loans	5. \$	· .	0.00		

Debtor 1 Joyce I	Elaine Hedgecoke	Case num	ber (if known)	
6. Utilities:				
	y, heat, natural gas	6a.	\$	100.00
6b. Water, s	ewer, garbage collection	6b.	\$	100.00
6c. Telepho	ne, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
6d. Other. S	pecify: Cell phone	6d.	\$	300.00
	sekeeping supplies		\$	556.00
	children's education costs	8.	\$	0.00
9. Clothing, laun	dry, and dry cleaning	9.	\$	185.00
-	products and services	10.	\$	100.00
	ental expenses	11.	\$	6.00
	n. Include gas, maintenance, bus or train fare.			
Do not include		12.		340.00
13. Entertainmen	, clubs, recreation, newspapers, magazines, and books	13.	\$	225.00
14. Charitable co	ntributions and religious donations	14.	\$	0.00
15. Insurance.			-	
	insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insu		15a.	•	0.00
15b. Health ir	surance	15b.	\$	0.00
15c. Vehicle	nsurance	15c.	\$	250.00
15d. Other in:	surance. Specify:	15d.	\$	0.00
16. Taxes. Do not Specify:	include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
7. Installment or				
17a. Car payı	nents for Vehicle 1	17a.	\$	448.71
17b. Car payı	ments for Vehicle 2	17b.	\$	0.00
17c. Other. S	pecify:	17c.	\$	0.00
17d. Other. S	pecify:	17d.	\$	0.00
	s of alimony, maintenance, and support that you did not report in your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I		\$	0.00
Other paymer	ts you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	perty expenses not included in lines 4 or 5 of this form or on Sc			
	es on other property	20a.	· -	0.00
20b. Real est		20b.		0.00
	, homeowner's, or renter's insurance	20c.		0.00
	ance, repair, and upkeep expenses	20d.	·	0.00
20e. Homeov	ner's association or condominium dues	20e.	·	0.00
Other: Specify	Emergency & Contingency Expenses.	21.	+\$	170.00
Rent-A-Cent	er		+\$	200.00
2 Calculate you	r monthly expenses			
22a. Add lines			\$	4,280.71
	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	4,200.71
		<u> </u>	·	
22c. Add line 2	2a and 22b. The result is your monthly expenses.		\$	4,280.71
3 Calculate vou	r monthly net income.			
•	e 12 (your combined monthly income) from Schedule I.	23a.	\$	4,086.68
	ur monthly expenses from line 22c above.	23b.	·	4,280.71
	a	_00.		4,200.71
	your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	23c.	\$	-194.03
For example, do modification to the No.	t an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect yee terms of your mortgage?			ease or decrease because of a
☐ Yes.	Explain here:			

Dobtor 1					
Debtor 1	Joyce Elaine Hed				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF ARIZONA			
Case number					
(if known)					eck if this is an nended filing
) }	- 400D				
Official Forn Declarat		n Individual D	ebtor's Schedi	ules	12/15
two married pe	eople are filing togethe	r, both are equally responsib	le for supplying correct infor	rmation.	
ou must file this	s form whenever you fi	le bankruptcy schedules or a	mended schedules. Making	a false statement, conce	aling property, or
btaining money	or property by fraud in	n connection with a bankrupt			
ears, or both. 18	8 U.S.C. §§ 152, 1341, 1	519, and 35/1.			
Sigr	n Below				
		one who is NOT an attorney	to help you fill out bankrupto	cy forms?	
		one who is NOT an attorney	to help you fill out bankrupto	cy forms?	
Did you pay		one who is NOT an attorney	to help you fill out bankrupto	cy forms? Attach Bankruptcy Petition	n Preparer's Notice,
Did you pay	y or agree to pay some	one who is NOT an attorney	to help you fill out bankrupto		
Did you pay ■ No □ Yes. N	y or agree to pay some			Attach Bankruptcy Petition Declaration, and Signatur	
Did you pay No Yes. N	y or agree to pay some	that I have read the summary		Attach Bankruptcy Petition Declaration, and Signatur	
Did you pay No Yes. N Under penal that they are	y or agree to pay some Name of person Ity of perjury, I declare e true and correct.	that I have read the summary	v and schedules filed with th	Attach Bankruptcy Petition Declaration, and Signatur is declaration and	
Did you pay No Yes. N Under penal that they are X /s/ Joyce	y or agree to pay some Name of person Ity of perjury, I declare e true and correct.	that I have read the summary	v and schedules filed with th	Attach Bankruptcy Petition Declaration, and Signatur is declaration and	
Did you pay No Yes. N Under penal that they are X /s/ Joyce Signatur	y or agree to pay some Name of person Ity of perjury, I declare e true and correct. ce Elaine Hedgecoke Elaine Hedgecoke	that I have read the summary	v and schedules filed with th	Attach Bankruptcy Petition Declaration, and Signatur is declaration and	
Did you pay No Yes. N Under penal that they are X /s/ Joyce Signatur	y or agree to pay some Name of person Ity of perjury, I declare e true and correct. ce Elaine Hedgecoke Elaine Hedgecoke re of Debtor 1	that I have read the summary	y and schedules filed with th X Signature of Debtor 2	Attach Bankruptcy Petition Declaration, and Signatur is declaration and	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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	mation to identify you									
Debtor 1	Joyce Elaine He	dgecoke Middle Name	Last Name							
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name							
United States B	ankruptcy Court for the:	DISTRICT OF ARIZONA								
Case number										
(if known)					Check if this is an					
					mended filing					
Official Fo	orm 107									
		Affairs for Individ	duals Filing for B	ankruptcy	4/19					
information. If		attach a separate sheet to		equally responsible for sup y additional pages, write you						
Part 1: Give	Details About Your Ma	arital Status and Where You	Lived Before							
1. What is yo	ur current marital statu	ıs?								
☐ Marrie	d									
■ Not ma	arried									
2. During the	During the last 3 years, have you lived anywhere other than where you live now?									
□ No										
Yes. L	ist all of the places you	lived in the last 3 years. Do no	ot include where you live now	1.						
Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there					
	Jasper Ave. Junction, AZ 85120	From-To: 1999 - 9/2019.	☐ Same as Debtor	I	☐ Same as Debtor 1 From-To:					
states and territo	, , , , , , , , , , , , , , , , , , ,			ity property state or territor ico, Texas, Washington and V						
■ No □ Yes. N	lake sure you fill out Sc	hedule H: Your Codebtors (Ot	fficial Form 106H)							
	·	·	molari omi room.							
Part 2 Expl	ain the Sources of You	r Income			-					
Fill in the to	tal amount of income yo	nployment or from operating ou received from all jobs and a have income that you received.	all businesses, including part		ndar years?					
□ No										
Yes. F	ill in the details.									
		Debtor 1		Debtor 2						
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
	1 of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,684.37	☐ Wages, commissions, bonuses, tips						
		☐ Operating a business		☐ Operating a business						
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page 1					

page 1

				Debtor 1			Debtor 2			
				Sources of income Check all that apply.	Gross incor (before dedu exclusions)		Sources of inco		Gross income (before deductions and exclusions)	
	· last calen nuary 1 to	dar year: December 31,	2019)	■ Wages, commissions, bonuses, tips	\$	35,769.19	☐ Wages, comr bonuses, tips	nissions,		
				☐ Operating a business			☐ Operating a business			
		dar year before December 31,		■ Wages, commissions, bonuses, tips	\$	46,841.00	☐ Wages, comr bonuses, tips	nissions,		
				☐ Operating a business			☐ Operating a b	usiness		
				☐ Wages, commissions, bonuses, tips		\$6,169.00	☐ Wages, comr bonuses, tips	nissions,		
				Operating a business			☐ Operating a b	usiness		
	and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.									
				Debtor 1 Sources of income Describe below.	Gross incoreach source (before deduexclusions)	•	Debtor 2 Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)	
		dar year before December 31,		Unemployment	\$1,920.00					
Par 6.		Debtor 1's or	Debtor 2's	Made Before You Filed for debts primarily consume botor 2 has primarily consu	er debts?	nsumer debt	s are defined in 11	 	11(8) as "incurred by an	
		individual prim During the 90 ☐ No. G	narily for a p days before to to line 7.	personal, family, or househo	old purpose." lid you pay any o	reditor a tota	ll of \$6,825* or more	e?		
		pa no	aid that cree ot include p	ach creditor to whom you pai ditor. Do not include paymer ayments to an attorney for the on 4/01/22 and every 3 year	nts for domestic	support oblig ase.	gations, such as chi	ld support a	and alimony. Also, do	
	Yes.	Debtor 1 or D	ebtor 2 or	both have primarily consu	umer debts.			aujustinen	ı.	
		J	•	- , · · · · · · · · · · · · · · · ·	,					
		■ Yes Li	clude paym	ach creditor to whom you pai nents for domestic support o his bankruptcy case.						
	Creditor'	s Name and A	ddress	Dates of payme	ent Tota	l amount paid	Amount you still owe	Was this	payment for	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Desc

(Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
7	Allen O. VanderWey and Elizabth Cole 7726 S. Apricot Dr. Fempe, AZ 85284	Monthly: \$1,150.00.	\$3,450.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Rent payment.
F	Exeter Finance LLC P.O. Box 204480 Dallas, TX 75320	10/24/2019: \$482.00. 11/2019: \$450.00.	\$932.00	\$19,323.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Rent-A-Center Attn: Customer Relations 5501 Headquarters Drive Plano, TX 75024	Monthly: \$200.00.	\$600.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Rent payment for household items.
<i>Ir</i> of a	Vithin 1 year before you filed for bankrup insiders include your relatives; any general perfector, person in business you operate as a sole proprietor. Illimony. No No Yes. List all payments to an insider.	artners; relatives of any gern control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corporation ny managing agent, including one fo
ı	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
ir	/ithin 1 year before you filed for bankrup nsider? nclude payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a debt that benefited ar
I	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Part 4	Identify Legal Actions, Repossession	ns, and Foreclosures			
Li	Jithin 1 year before you filed for bankrup ist all such matters, including personal injury nodifications, and contract disputes.	tcy, were you a party in a			
	No Yes. Fill in the details.				
	Case title	Nature of the case	Court or agency		Status of the case

7.

8.

9.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Desc

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☐ No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: **CRB Auto Finance** Debtor helped pay loan. 11/12/2019 & \$370.45 9/26/2019. P.O. Box 98541 11/12/2019: \$200.00. Las Vegas, NV 89193-8541 9/26/2019: \$170.45. Person's relationship to you: Auto loan belonging to son.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed Value

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Date Transfer was

made

Desc

Description and value of the property transferred

Par	List of Certain Financial Accou	nts, Instru	uments, Safe Depos	it Boxes, and St	orage U	Inits				
20.	Within 1 year before you filed for ban sold, moved, or transferred? Include checking, savings, money ma houses, pension funds, cooperatives	arket, or c	other financial accou	ınts; certificates	of dep					
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		ast 4 digits of ccount number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have wit cash, or other valuables?	thin 1 yea	ır before you filed fo	or bankruptcy, ar	ny safe	deposit box or other deposi	tory for securities,			
	■ No									
	☐ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP	Code)	Who else had ac Address (Number, State and ZIP Code)		Descri	be the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	No Vos Fill in the details									
	Yes. Fill in the details.				_		-			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)									
Par	rt 9: Identify Property You Hold or C	ontrol for	Someone Else							
23.	Do you hold or control any property t for someone.	hat some	one else owns? Inc	lude any proper	ty you b	porrowed from, are storing f	or, or hold in trust			
	■ No									
	Yes. Fill in the details.									
	Owner's Name					be the property	Value			
	Address (Number, Street, City, State and ZIP	Code)	(Number, Street, City, Code)	State and ZIP						
Par	rt 10: Give Details About Environmen	tal Inforn	nation							
For t	the purpose of Part 10, the following o	lefinitions	s apply:							
	Environmental law means any federa toxic substances, wastes, or material regulations controlling the cleanup o	into the	air, land, soil, surfac	e water, ground						
	Site means any location, facility, or poto own, operate, or utilize it, including			environmental l	aw, who	ether you now own, operate	, or utilize it or used			
	Hazardous material means anything a hazardous material, pollutant, contain			as a hazardous	waste,	hazardous substance, toxid	: substance,			
Rep	ort all notices, releases, and proceedi	ngs that y	ou know about, reg	ardless of when	they o	ccurred.				
24.	Has any governmental unit notified ye	ou that yo	ou may be liable or p	ootentially liable	under o	or in violation of an environ	mental law?			
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and know it						Date of notice			
			ZIP Code)							

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Desc

25.	Hav	e you notified any governmental uni	t of a	ny release of hazardous material?							
		No									
		Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Cod	e)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law know it	, if you	Date of notice			
26.	Hav	e you been a party in any judicial or	admi	nistrative proceeding under any envi	ronn	nental law? Include	settlements a	nd orders.			
		Yes. Fill in the details.									
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case		Status of the case			
Par	11:	Give Details About Your Business	or C	onnections to Any Business							
27.	With	nin 4 years before you filed for bankr	uptcy	y, did you own a business or have an	y of	the following conn	ections to any	business?			
		■ A sole proprietor or self-employe	ed in	a trade, profession, or other activity,	eith	er full-time or part-t	ime:				
		☐ A member of a limited liability co	mpai	ny (LLC) or limited liability partnershi	ip (L	LP)					
		☐ A partner in a partnership									
		☐ An officer, director, or managing executive of a corporation									
		☐ An owner of at least 5% of the voting or equity securities of a corporation									
		No. None of the above applies. Go	Ū	. ,							
	_	• •		n the details below for each business	2						
	Business Name Describe the nature of the business Employer Identification number										
	Address (Number, Street, City, State and ZIP Code)			Name of accountant or bookkeeper		Do not include Social Security number or ITIN.					
				·		Dates business existed					
		lf-Employed. 65 Krista Way	I	Education Consulting.		EIN: 9060.					
		mpe, AZ 85284				From-To 2017 - 2018.					
28.		nin 2 years before you filed for bankr itutions, creditors, or other parties.	uptcy	y, did you give a financial statement t	to an	yone about your bu	ısiness? Inclu	de all financial			
		No Yes. Fill in the details below.									
	- Na		1	Date Issued							
		dress nber, Street, City, State and ZIP Code)									
Par		Sign Below									
are t	rue a a ba	and correct. I understand that makin	g a fa	ncial Affairs and any attachments, an alse statement, concealing property, o 250,000, or imprisonment for up to 20	or ob	otaining money or p					
Joy	ce l	ce Elaine Hedgecoke Elaine Hedgecoke re of Debtor 1		Signature of Debtor 2							
Dat	e F	February 3, 2020		Date							
Did :		attach additional pages to <i>Your Stat</i> e	emen	t of Financial Affairs for Individuals F	Filing	for Bankruptcy (O	fficial Form 10	7)?			
Offici	al Fo	rm 107 Sta	temer	nt of Financial Affairs for Individuals Filing	for E	Bankruptcy		page [·]			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Debtor 1 Joyce Elaine	Hedgecoke	Case number (if known)	
☐ Yes			
_ , , , , , ,	ay someone who is not an attorney to help you fill out ba	nkruptcy forms?	
No			
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Decl	aration, and Signature (Official Form 119).	

Fill in this inform	nation to identify your	0250:				
Debtor 1						
Debior	Joyce Elaine Hed	Middle Name	La	st Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	La	st Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF AR	IZONA			
Case number	.,.,					
(if known)						☐ Check if this is an amended filing
Official For Statemen		n for Indiv	riduals F	iling Under Ch	napter 7	12/15
creditors have you have lease You must file this	ver is earlier, unless th	ur property, or nd the lease has n ithin 30 days after	ot expired. you file your ba	: nkruptcy petition or by the . You must also send cop		
	ople are filing togethe	r in a joint case, bo	th are equally re	esponsible for supplying c	orrect informat	ion. Both debtors must
	nd accurate as possib our name and case nur		needed, attach	a separate sheet to this fo	orm. On the top	of any additional pages,
Part 1: List Yo	ur Creditors Who Hav	e Secured Claims				
1. For any credito information be	-	art 1 of Schedule D	: Creditors Who	Have Claims Secured by	Property (Offic	ial Form 106D), fill in the
Identify the cre	ditor and the property t	hat is collateral	What do you secures a del	intend to do with the prop		Did you claim the property as exempt on Schedule C?
Creditor's Ex	keter Finance LLC		☐ Surrender t☐ Retain the	he property. property and redeem it.	Ι	□ No
Description of property securing debt:	2018 Nissan Altima 4D 20,000 miles Vehicle is in very g condition. Value obtained fro www.kbb.com. Lienholder: Exeter Located at debtor	good m Finance LLC.	Reaffirmat	property and enter into a ion Agreement. property and [explain]:		Yes
Part 2: List Yo	ur Unexpired Persona	I Proporty I coocc				
For any unexpire in the information	d personal property le n below. Do not list rea	ase that you listed Il estate leases. Un	expired leases a		effect; the lease	ses (Official Form 106G), fill e period has not yet ended.
Describe your u	nexpired personal pro	perty leases			Will t	he lease be assumed?
Lessor's name:	Allen O. Vande	erWey and Elizab	oth Cole		□ No)
					■ Ye	es
Official Form 108		Statement of In	tention for Indiv	iduals Filing Under Chapt	er 7	page

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Debt	tor 1 <u>J</u>	oyce Ela	ine Hedgecoke	Case nu	umber (if known)
	cription o erty:	of leased	Residential lease agr	reement, expires 7/1/2020, debtor to assum	e.
Less	or's nam	ne:	Sprint		□ No
					Yes
Prop	erty:	of leased	Wireless cell phone	service provider, expires 3/2020, debtor to a	assume.
prop	er penalt erty that	is subjec	ry, I declare that I have in t to an unexpired lease. e Hedgecoke	ndicated my intention about any property of my o	estate that secures a debt and any personal
-	Joyce Elaine Hedgecoke Signature of Debtor 1		_	Signature of Debtor 2	
	Date	Februa	ary 3, 2020	Date	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill in this info	ormation to identify your case:		Ch	eck one	hov only as di	rected in this form and	l in Form
Debtor 1	Joyce Elaine Hedgecoke			2A-1Su		rected in this form and	
Debtor 2				■ 1. Tł	nere is no presi	umption of abuse	
(Spouse, if filing)				_	·	o determine if a presur	motion of abuse
United States	Bankruptcy Court for the: District of Arizona			а	pplies will be m	nade under Chapter 7	
Case numbe	r				,	cial Form 122A-2).	
(ii khown)						does not apply now be service but it could ap	
				☐ Che	eck if this is a	n amended filing	
	Form 122A - 1						
Chapte	r 7 Statement of Your Cur	rent Mor	nthly Inc	ome	•		12/19
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to w f known). If you believe that you are exempted fror ary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the addition n a presumption	of abuse becau	applies. Ise you o	On the top of ar	ny additional pages, writ narily consumer debts o	te your name and or because of
1. What is	your marital and filing status? Check one on	ly.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Marr	ied and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.			
	ied and your spouse is NOT filing with you.	-	•				
□ Li	ving in the same household and are not lega	Ily separated. F	Fill out both Co	lumns A	and B, lines 2	? - 11.	
p	ving separately or are legally separated. Fill on enalty of perjury that you and your spouse are leading apart for reasons that do not include evading.	egally separated	l under nonbar	kruptcy	law that applie	es or that you and your	
101(10A). F the 6 month	verage monthly income that you received from all or example, if you are filing on September 15, the 6-ms, add the income for all 6 months and divide the total on the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 thro sult. Do not inclu	ugh Augi de any in	ust 31. If the amo	unt of your monthly incon ore than once. For examp	ne varied during ble, if both
				Colum Debto		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, a deductions).	and commissio	ons (before all	\$	5,011.49	\$	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you of from an and roo	unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household mmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular, your depender	contributions nts, parents,	\$	0.00	\$	
5. Net inc	ome from operating a business, profession,						
		\$ 0.00	tor 1				
	eceipts (before all deductions)	-\$ 0.00					
	 and necessary operating expenses anthly income from a business, profession, or farr 		Copy here ->	\$	0.00	\$	
	ome from rental and other real property		.,			·	
		Deb	tor 1				
Gross re	eceipts (before all deductions)	\$0.00					
	and necessary operating expenses	-\$ 0.00		•	2.22	•	
Net mor	nthly income from rental or other real property	\$	Copy here ->	-	0.00	\$	
7 Interest	. dividends, and rovalties			\$	0.00	¥	

				Column A Debtor 1		Column B Debtor 2 or non-filing spor	use
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	efit under			· -	_
	For you \$	0	.00				
	For you \$ For your spouse \$						
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as st not include any compensation, pension, pay, annuity, or United States Government in connection with a disabilit disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapt	nount received that wa cated in the next senter allowance paid by the y, combat-related injunction. If you received and pay only to the extent would otherwise be	ence, do ne ury or ny retired that it	\$	0.00	\$	
10.	Income from all other sources not listed above. Spe						
	Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hundomestic terrorism; or compensation, pension, pay, anr United States Government in connection with a disabilit disability, or death of a member of the uniformed service sources on a separate page and put the total below.	nanity, or internationa nuity, or allowance pa y, combat-related inju	al or id by the ury or				
				\$	0.00	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	5,011.49	+ \$		\$5,011.49
							Total current monthly
Part	2: Determine Whether the Means Test Applies to	o You					income
12.	Calculate your current monthly income for the year.	Follow these steps:					
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11 h	nere=> \$	5,011.49
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b. \$	60,137.88
13.	Calculate the median family income that applies to	you. Follow these ste	ps:				
	Fill in the state in which you live.	AZ					
	Fill in the number of people in your household.	2				_	
	Fill in the median family income for your state and size	of household.				13. \$	64,543.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank		specified	in the separa	ate instruc	tions	
1.1	How do the lines compare?	ruptey cierk's office.					
17.	<u> </u>	o the ten of page 1. o	hook hov	1 Thoroic	no progum	ention of obvion	
	Go to Part 3. Do NOT fill out or file Official	Form 122A-2.					400 4 0
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	r page 1, check box 2	z, The pro	esumption of	abuse is (aeterminea by Fo	fffi 122A-2.
Part		the of the state of the			*	all and the first	
	By signing here, I declare under penalty of perjury	tnat the information of	on this sta	atement and	in any atta	acnments is true a	and correct.
	X /s/ Joyce Elaine Hedgecoke						
	Joyce Elaine Hedgecoke Signature of Debtor 1						
	Date February 3, 2020						

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Debtor 1	Joyce	Elaine	Hedgecol	кe
----------	-------	---------------	----------	----

Case number (if known)

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Desc

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2019 to 01/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Arizona College.

Income by Month:

6 Months Ago:	08/2019	\$4,615.38
5 Months Ago:	09/2019	\$4,615.38
4 Months Ago:	10/2019	\$4,615.38
3 Months Ago:	11/2019	\$6,923.07
2 Months Ago:	12/2019	\$4,615.38
Last Month:	01/2020	\$4,684.37
	Average per month:	\$5,011.49

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
	+ \$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee total fee \$1,717

Chapter 11 is often used for reorganizing a business,

but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
<u> </u>	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Arizona

In re	Joyce Elaine Hedgecoke		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, o	or agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	2,395.00	
	Prior to the filing of this statement I have received		\$	2,395.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	■ I have not agreed to share the above-disclosed compo	ensation with any other person u	inless they are mem	pers and associates of i	my law firm.
[☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				w firm. A
6. I	n return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects	of the bankruptcy c	ase, including:	
b c	 Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] 	ement of affairs and plan which	may be required;	-	ıptcy;
7. B	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis motion for relief from stay actions, motion motion to reopen case, motions to dismi and adversary complaints.	chargeability claims, judicions to reinstate case, objec	al lien avoidance tion to claims, ol	jections to exempt	tions,
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for p	payment to me for re	epresentation of the de	btor(s) in
Fe	ebruary 3, 2020	/s/ Sandra C. Osw	alt/John D. Yohe		
Date		Sandra C. Oswalt/			_
		Signature of Attorney Oswalt Law Group			
		300 W. Clarendon			
		Suite 290	_		
		Phoenix, AZ 85013 602-225-2222 Fax			
		jyohe@oswaltlaw			
		Name of law firm	g up. ooiii		

United States Bankruptcy Court District of Arizona

In re	Joyce Elaine Hedgecoke		Case No.	
		Debtor(s)	Chapter	7
				opplemental Mailing List newly added or
	MAILII	NG LIST DECLARATION	ON	
	I, Joyce Elaine Hedgecoke , do hereby of page(s), is complete, correct and consistent v	with the debtor(s)' Schedules.	ailing List, consisting	
Date:	February 3, 2020	/s/ Joyce Elaine Hedgecoke		
		Joyce Elaine Hedgecoke		
		Signature of Debtor		
Date:	February 3, 2020	/s/ Sandra C. Oswalt/John D. Y	ohe	
		Signature of Attorney		
		Sandra C. Oswalt/John D. Yohe	•	
		Oswalt Law Group, PC		
		300 W. Clarendon Avenue		
		602-225-2222 Fax: 602-773-57	39	
		Suite 290 Phoenix, AZ 85013	39	

MML_Requirements_8-2018 MML-3

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AD ASTRA RECOVERY SERVICES, INC. 7330 W. 33RD STREET N., STE. 118 WICHITA KS 67205

ALLIED INTERSTATE, LLC P.O. BOX 361774 COLUMBUS OH 43236

ALLY FINANCIAL P.O. BOX 380901 MINNEAPOLIS MN 55438-0901

ARIZONA DEPARTMENT OF REVENUE BANKRUPTCY UNIT, 7TH FLOOR 1600 W. MONROE STREET PHOENIX AZ 85007

ARIZONA WATER COMPANY P.O. BOX 400 APACHE JUNCTION AZ 85117

AT & T MOBILITY 1025 LENOX PARK BLVD., NE, RM. A325 ATLANTA GA 30319

AT&T MOBILITY PO BOX 6463 CAROL STREAM IL 60197

BRIDGECREST ACCEPTANCE CORP. P.O. BOX 53087 PHOENIX AZ 85072

CAPITAL ONE BANK USA, N.A. CORPORATE HEADQUARTERS 1680 CAPITAL ONE DRIVE MCLEAN VA 22102

CB INDIGO/GF PO BOX 4499 BEAVERTON OR 97076

CELTIC BANK 121 CONTINENTAL DRIVE, STE. 110 NEWARK DE 19713 CITIBANK, N.A.
701 EAST 60TH STREET NORTH
SIOUX FALLS SD 57117

COAST TO COAST 101 HODENCAMP ROAD, STE 120 THOUSAND OAKS CA 91360

COLLECTION BUREAU OF AMERICA 25954 EDEN LANDING ROAD HAYWARD CA 94545

COMENITY BANK
BANKRUPTCY DEPARTMENT
P. O. BOX 182125
COLUMBUS OH 43218-2125

CREDIT COLLECTION SERVICES TWO WELLS AVENUE NEWTON CENTER MA 02459

CREDIT ONE BANK, N.A. P.O. BOX 98875
LAS VEGAS NV 89193

DIRECTV PO BOX 5007 CAROL STREAM IL 60197

DISH NETWORK
P.O. BOX 7203
PASADENA CA 91109-7303

DS SERVICES OF AMERICA 2300 WINDY RIDGE PARKWAY STE. 500N ATLANTA GA 30339

ENHANCED RECOVERY COMPANY, LLC 8014 BAYBERRY ROAD JACKSONVILLE FL 32256-7412

EXETER FINANCE LLC P.O. BOX 204480 DALLAS TX 75320

FEDERAL LOAN SERVICING P.O. BOX 60610 HARRISBURG PA 17106

FREEDOM FINANCIAL ASSET 1875 S. GRANT ST. STE 400 SAN MATEO CA 94402

INTERNAL REVENUE SERVICE CENTRAL INSOLVENCY OPERATIONS P.O. BOX 7346 PHILADELPHIA PA 19101

JONATHAN HEDGECOKE 1865 KRISTA WAY TEMPE AZ 85284

JPMCB CARD P.O. BOX 15298 WILMINGTON DE 19850

KOHLS PAYMENT CENTER P.O. BOX 30510 LOS ANGELES CA 90030

LABCORP
PO BOX 2240
BURLINGTON NC 27216

PORTFOLIO RECOVERY ASSOCIATES, LLC POB 41067 NORFOLK VA 23541

RADIUS GLOBAL SOLUTIONS, LLC PO BOX 390900 MINNEAPOLIS MN 55439

SEQUIUM ASSET SOLUTIONS, LLC 1130 NORTHCASE PKWY., STE. 150 MARIETTA GA 30067

SPEEDY CASH ATTN: BANKRUPTCY DEPT. P.O. BOX 780408 WICHITA KS 67278 SUNRISE CREDIT SERVICES, INC. 260 AIRPORT PLAZA, P.O. BOX 9168 FARMINGDALE NY 11735

SYNCHRONY BANK ATTN: BANKRUPTCY DEPARTMENT P.O. BOX 965060 ORLANDO FL 32896-5060

TD BANK USA/TARGET CREDIT P.O. 673 MINNEAPOLIS MN 55440

TRIDENT ASSET MANAGEMENT 53 PERIMETER CTR. E. STE. 450 ATLANTA GA 30346

VERIZON WIRELESS ATTENTION: BANKRUPTCY DEPT. 500 TECHNOLOGY DRIVE, STE. 550 WELDON SPRING MO 63304